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STATEMENT OF ORGANIZATION

(See instructions)

Office use only

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
1st in the Nation Politi	cal Action Committee		111111	
	11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	<u> </u>		
ADDRESS (number and street)	P.O. Box 66683			
(Check if address is changed)	:			
	Washington		PC L	20035
		CITY	STATE _	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	SS (Please provide only one e	e-mail address)		
(Check if address is changed)	satterfield.david@ar	entfox.com		
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
(Check if address is changed)				1
		1 1 1 1 1 1 1 1 1 1		
2. DATE MO 7 ' DO 7 ' O 10 O	0 8	C		
4. IS THIS STATEMENT X	: NEW (N) OR	AMENDED (A)		
4. TO THIS STATEMENT	NEW (N)	VIAICIADED (V)		
I certify that I have examined this St Type or Print Name of Treasure		wledge and belief it is true, correct	and complete	
Signature of Treasurer Electron	onically Filed by Mr. Craig	Engle	Date 0,7 ^M	08 ' 2010'
NOTE: Submission of false, erroned		y subject the person signing this Sta	·	f 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Comm Toll Free 800-424-9530	n contact: ission	FEC FORM 1 (Revised 02/2009)